

# HOT SPOT

## Hang on Tight—Stories, Parables, Occurrences, Training

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### Spotlight on Care: Flu

#### Are you prepared?

Now is the time to receive the Flu vaccine. CDC recommends that you consult with your health care provider before getting vaccinated.

Both the flu and a cold are viral infections and can cause symptoms such as coughing and sore throat. A cold is a minor viral infection of the nose and throat. The flu, however, is usually more severe, with high fever and the addition of aches and pains. Flu continues to be contagious for 3 or 4 days after symptoms appear.

#### What Are Flu Symptoms?

If you get infected by the flu virus, you will usually feel symptoms 1 to 4 days later. You can spread the flu to others before your symptoms start and for another 3 to 4 days after your symptoms appear. The symptoms start very quickly and may include

- Headache • Body aches • Stuffy nose
- Chills • Fever • Sore throat • Dry cough

Typically, the fever begins to decline on the second or third day of the illness. The flu almost never causes symptoms in the stomach and intestines. The illness that some people often call “stomach flu” is not influenza.

Doctors urge prevention as the best way to deal with the flu. They recommend frequent hand washing and urge people who feel sick, or if a family member is sick, to stay home. Rest is also important to help you get better. Plus, if you stay home, there's less risk that you'll give the flu to other people.

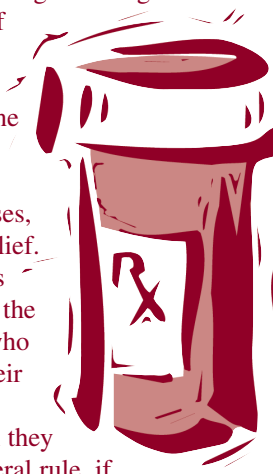
**Don't take the virus to work with you.**

### MORTALITY ALERT!

#### Phenergan (promethazine hydrochloride)

*Thanks to — Dr. Adadot Hayes — for this informative article.*

Nausea and vomiting are common symptoms all of us have from time to time. In most cases it is self limited and often related to temporary upset stomach, mild flu, etc. however, if vomiting persists, it may be indicative of a symptom of a serious illness such as medication side effects, migraine headaches, significant GI problems, infection or other potentially serious illnesses that may require an evaluation. In addition, dehydration is a risk for on-going vomiting and this is usually related to the size of the person, the frequency of vomiting and whether or not there is also diarrhea. It is also important in someone who has nausea and vomiting to look for other symptoms such as rashes, temperature, diarrhea, etc. In many cases, medication is given as symptomatic relief. Uses of medication for vomiting varies from physician to physician as well as the type of medication used. Individuals who are non-verbal or who do not direct their own health care or do not voice symptoms may be at greater risk when they have symptoms of vomiting. As a general rule, if vomiting persists beyond a few episodes, or a day's duration, an individual should have an evaluation to include history, physical and perhaps laboratory evaluations, particularly looking for signs of dehydration. One of the common drugs utilized to suppress symptoms of vomiting is Phenergan. This medication is an antihistamine. It is also used as a sedative or to prevent and control nausea and vomiting.



This medication has various levels of side effects of which the most common is drowsiness, which can be quite significant. Phenergan also has a number of other side effects, and although not very common, these include abnormal eye movements, agitation, asthma, blood disorders, blurred vision, changes in blood pressure, confusion, disorientation, dizziness, double vision, dry mouth, excitement, faintness, fatigue, fever,

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The HOT SPOT can be found on the web site for the State of Tennessee. Find it easily at [www.state.tn.us/mental/publicate.html](http://www.state.tn.us/mental/publicate.html)

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hallucinations, hives, hysteria, impaired or interrupted breathing, insomnia, irregular heartbeat, lack of coordination, lack of energy, loss of movement, nasal stuffiness, nausea, nervousness, nightmares, protruding tongue, rapid heartbeat, rash, rigid muscles, ringing in the ears, sedation, (extreme calm), seizures, sensitivity to light, sleepiness, slow heartbeat, stiff neck, sweating, swollen face and throat, tremors, unnaturally good mood, vomiting, and yellow skin and eyes. In addition, this medication should not be used if a person has had a prior allergic reaction to it or related medications such as Thorazine, Mellaril, Stelazine, or Prolixin. Special warnings about this medication note that in some cases other medication should have their dosages adjusted. This medication also has the risk to increase seizures. Phenergan must be used very carefully in people with breathing problems such as emphysema or sleep apnea as there may be a serious or even fatal decline in breathing function.

Phenergan can also cause a potentially fatal condition called neuroleptic malignant syndrome often seen in the use of psychotropics. Symptoms include high fever, rigid muscles and a rapid or irregular heartbeat. These symptoms would constitute an emergency. Other cautions listed for the use of Phenergan note problems with individuals with heart disease, high blood pressure, circulatory problems, liver problems, an eye condition called narrow angle glaucoma, peptic ulcer or other abdominal obstructions or urinary bladder obstructions due to enlarged prostate.

The following medications have higher rates of an interaction and if an individual is on these medications it should be discussed with their doctor: certain antidepressants including Elavil and Tofranil, drugs that control spasms such as Cogentin, drugs that reduce bone marrow function (certain cancer drugs), MAO inhibitors, narcotic pain relievers such as Demerol and Dilaudid, and sedatives such as Halcion, Dalmane and Seconal and tranquilizers such as Xanax and Valium.

Phenergan is available in tablets, syrup, and suppository forms and occasionally as a topical preparation. The average oral dose for an adult is 25 mg. Also it is important to note that an overdose of Phenergan can be fatal. Symptoms of Phenergan overdose may include difficulty breathing, dry mouth, fixed and dilated pupils, flushing, heightened reflexes, loss of consciousness, muscle tension, poor coordination, seizures, slow down in brain activity, slow heartbeat, stomach and intestinal problems, and very low blood pressure. It is clear that while Phenergan can be a helpful symptomatic treatment for nausea and vomiting, the underlying cause should be followed. In most cases the symptoms should resolve quickly. If not, it is important to discuss the continuing symptoms and work with a doctor to evaluate both the underlying cause and the need for continuing administration of Phenergan.

## Quick Tips When Getting a Prescription

*The single most important way you can stay healthy is to be an active member of your own health care team. One way to get high-quality health care is to find and use information and take an active role in all of the decisions made about your care. This information will help you when getting a prescription filled.*

Understanding the importance your medication plays in your treatment will help you get the most benefit from your prescription. It is important to take an active role in your health care by working with your doctor, nurse, and pharmacist to learn as much as possible about your prescription.

When you are prescribed a new medication, ask your doctor or pharmacist the following questions:

- What is the name of the medicine? What is it supposed to do?
- Is it okay to substitute a less-expensive generic medicine for the name brand? Will it achieve the same effect?
- What is the dose of the medicine? Are there food, drinks, other medicines, or activities I should avoid while taking this medicine?
- What are the possible side effects of the medicine? What should I do if they occur?
- How many refills of this prescription can I get?
- What should I do if I miss a dose?
- What should I do if I accidentally take more than the recommended dose?
- Is there any written information I can take home with me? (Most pharmacies have information sheets that you can use as an at-home reference.)

When you pick up your medicine at the pharmacy, check to be sure it is the medicine you were prescribed by your doctor.

When your doctor prescribes a medication for you for the first time, make sure to tell him or her the following:

- The names of all medicines you are currently taking, including both over-the-counter and prescription medication. It is important for your doctor to know this information in order to prescribe the medicine that will be the most helpful.
  - Any concerns you have about using your medication.
  - If you are allergic to any medication or have had troubling side effects from a medication that has been prescribed to you.
- During your treatment, you should schedule a follow-up visit to your physician in order to monitor your progress. Make sure to tell him or her:
- About any problems you are having with your prescription.
  - About any side effects or problems you have had since starting to take the prescription.
  - About any new prescriptions that another doctor may have given you and any over-the-counter medicines that you started taking since your last doctor's visit.
  - How you are feeling since starting the medication.

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# MORTALITY ALERT!

## Take Precaution When Administering OTC/PRN Medication

Staff is reminded to read the complete ingredient section of the label for over-the-counter medications. The name of the medication may not reveal the true ingredients. To minimize the risks of an accidental overdose, consumers should avoid taking multiple medications that contain the same active ingredient at the same time. Inactive ingredients, which are labeled “inactive” by the FDA because they presumably have no effect on the body, can indeed be problematic. Many OTC medications contain additives that may surprise you, such as artificial dyes, caffeine and sweeteners like aspartame. Be sure to read the inactive ingredients on the label along with the active ingredient section to be sure you are aware of exactly what you are consuming.

It is possible to overdose without even knowing you took too much. For instance, according to government estimates about 100 people die each year after unintentionally taking too much acetaminophen (an overdose of the drug, which includes Tylenol, can poison the liver).

One of the biggest problems is that many OTC medicines sold for different uses have the same active ingredient. So someone who takes a cold remedy along with a headache remedy or

prescription pain reliever may be inadvertently receiving three or four times the safe level. You should avoid taking multiple drugs with the same active ingredient at the same time.

Along with acetaminophen, another group of OTC drugs to watch out for are painkillers called NSAIDs (nonsteroidal anti-inflammatory drugs), which include aspirin, ibuprofen, naproxen and ketoprofen. Overdosing on these widely available drugs can cause stomach bleeding and kidney problems.

Drug overdoses occur when a person takes more than the medically recommended dose. However, some people may be more sensitive to certain medications so that the high end of the therapeutic range of a drug may be toxic for them.

The prescribing practitioner, the local poison center, or the Emergency Department of your local hospital may be able to help determine the seriousness of a suspected drug overdose. Development of any symptoms of drug overdose requires immediate and accurate information about the specific name and dose of the drug, the amount of the drug, and the time when the drug was taken. Often, the bottle the drug came in will have the information needed.

- Some doctors' offices are equipped to handle overdoses. Others will advise their patients to go to a hospital's Emergency Department. In life-threatening circumstances, an ambulance should be summoned usually by calling 911.
- You are not expected to know when a drug overdose is serious. If you cannot reach a qualified professional by telephone to discuss the overdose, it would be prudent for you to take the overdosed person to the nearest hospital's Emergency Department or medical facility.

## Food Storage Guide

Make the most of your fridge and freezer with this handy guide to storing foods.

### Refrigerator Storage Guide

#### Dairy

Cheddar cheese -- 3 to 4 weeks  
1% cottage cheese -- 5 to 7 days, or package date  
Neufchatel cheese -- 2 weeks  
Parmesan cheese (grated) -- 1 year  
Reduced-fat cream cheese -- 2 weeks  
Swiss cheese -- 3 to 4 weeks  
Margarine -- 1 month  
Low-fat buttermilk -- 1 to 2 weeks

#### Meats (Beef, lamb, pork, and veal)

Ground meat -- 1 to 2 days  
Roast -- 2 to 4 days  
Steaks, chops -- 3 to 5 days  
Stew meat -- 1 to 2 days

#### Fruits & Vegetables

Apples -- 3 weeks  
Asparagus -- 2 days  
Carrots -- 2 to 3 weeks  
Cauliflower -- 4 days  
Citrus -- 10 days to 2 weeks  
Corn -- 1 day  
Kale -- 4 days  
Okra -- 4 days  
Peas -- 2 days  
Radishes -- 2 to 3 weeks  
Tomatoes -- 4 days

#### Eggs, poultry

Chicken, turkey -- 1 to 2 days  
Eggs -- 1 month  
Egg substitute -- 1 month  
Fish -- 1 to 2 days

### Freezer Storage Guide

#### Dairy, eggs

Cheese -- 4 months

Egg substitute -- 6 months  
Eggs, whites -- 6 months  
Eggs, yolks -- 8 months

#### Fruit & Vegetables

Commercially frozen fruits -- 1 year  
Commercially frozen vegetables -- 8 months

#### Meats

Beef -- 6 months to 1 year  
Chicken, cooked -- 1 month  
Chicken, pieces -- 3 months  
Chicken, whole -- 3 to 6 months  
Lamb -- 6 to 9 months  
Pork -- 3 to 6 months  
Turkey -- 6 months  
Veal -- 6 to 9 months  
Ground meats -- 3 to 4 months  
Leftover cooked meats -- 3 months

# The Pocket Guide to Staying Healthy at 50+

AHRQ has just released a booklet for older adults called The Pocket Guide to Staying Healthy at 50+. This guide incorporates new research-based recommendations from the U.S. Preventive Services Task Force. The guide was developed in partnership with AARP, and it updates the original Staying Healthy at 50+ published in 2000. The Pocket Guide, available in English and Spanish, includes tips and recommendations on good health habits, screening tests, and immunizations. It provides easy-to-use charts to help track personal health information and includes questions to ask health care providers, as well as resources to contact for additional information.

The guide is available on the AHRQ Web site in English <<http://www.ahrq.gov/ppip/50plus/>> and Spanish <<http://www.ahrq.gov/ppip/50plussp/>> . Printed copies are available from the AHRQ Publications Clearinghouse by calling (800) 358-9295 or sending an e-mail to [ahrqpubs@ahrq.gov](mailto:ahrqpubs@ahrq.gov) <<mailto:ahrqpubs@ahrq.gov>> .

## Quick Tips... from page 2

Remember, quality matters, especially when it comes to your health.

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The Tennessee Department of Finance and Administration, Division of Mental Retardation Services, is committed to principles of equal opportunity, equal access and affirmative action. Contact the department's Title VI Coordinator at (615) 253-6811 or the ADA Coordinator at (615) 253-6811 for inquiries, complaints or further information.



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ADDRESS CORRECTION REQUESTED

Ruth Givens RN, Health Services Education Coordinator  
Division of Mental Retardation Services  
Andrew Jackson Building, 15th Floor  
500 Deaderick Street  
Nashville, TN 37243